

CLAIMS ONLY	Application Number	10/618191	Filing Date
	Applicant(s)		

10/6/8/9/

11

[illegible]

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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49						
50						
Total Indep						
Total Depend						
Total Claims						

may be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						